



Registration and Records  
 PO Box 967  
 Roseburg, Oregon 97470  
 541.440.4604 | Fax 541.440.7713  
[Registration@umpqua.edu](mailto:Registration@umpqua.edu)

# Graduation Application

## Graduation Fee \$50 *(Required and MUST accompany this application)*

- When your evaluation is complete, you will receive a copy of your current Degree Audit via your UCC student email.
- Commencement Ceremony information packets are mailed to all graduation applicants in May.
- Your degree will be mailed to your address listed on this application upon successful completion of your program.
- Any changes to this application must be submitted to the Registration and Records Office using the Graduation Application Change Form.

**Section 1 – DEGREE NAME & ADDRESS *(Print name as you would like to appear on your degree)***

Last Name	First Name	Middle Name or Initial	Student ID Number
Mailing Address		City	State
			Zip
<input type="checkbox"/> Update my current mailing address <input type="checkbox"/> This address is for Diploma mailing only			
Phone Number			

**Section 2 – DEGREE INFORMATION**

**Expected TERM & YEAR of completion:**  
 Summer  
 Fall  
 Winter  
 Spring  
**YEAR:** \_\_\_\_\_

**CATALOG YEAR:** \_\_\_\_\_ *(Academic year you began your program)*

**DEGREE:**

- AAOT** (Associate of Arts Oregon Transfer)
- AS** (Associate of Science) in: \_\_\_\_\_
- AGS** (Associate of General Studies)
- AAS** (Associate of Applied Science) in: \_\_\_\_\_
- Certificate** in: \_\_\_\_\_       **Certificate** in: \_\_\_\_\_
- Certificate** in: \_\_\_\_\_       **Certificate** in: \_\_\_\_\_
- Pathway Certificate** *(Pathway Certificates are automatically awarded and do not require application. A physical certificate can be printed and mailed with this application and payment)*

**Previous attended colleges / universities**

**No**    **Yes** If yes, please list colleges: \_\_\_\_\_

**Student Signature** \_\_\_\_\_ **Date:** \_\_\_\_\_

Signifies Approval & Authorization

Office use ONLY

**DEGREE PROCESSING:**

Degree mailed to last known address

Date \_\_\_\_/\_\_\_\_/\_\_\_\_ Initials: \_\_\_\_\_

Updated Major

Notes: \_\_\_\_\_

Office use ONLY

**GRADUATION STATUS:**

Audit Frozen      Date \_\_\_\_/\_\_\_\_/\_\_\_\_      Initials: \_\_\_\_\_      Accumulative GPA \_\_\_\_\_

Evaluation Email      Date \_\_\_\_/\_\_\_\_/\_\_\_\_      Initials: \_\_\_\_\_

Approve       Deny       See Evaluation

Comments: \_\_\_\_\_

\_\_\_\_\_

Director / Registrar Approval & Authorization      Date